APPLICA		ARRIAGE CERTIFICATE
THIS IS A REQUEST FOR THE	MARRIAGE CE	RTIFICATE OF:
FULL NAME OF GROOM:		
FULL MAIDEN NAME OF BRIDE	<u>:</u>	
DATE OF MARRIAGE:	_TOWN OF MAR	RRIAGE:
# OF COPIES REQUESTED (\$5	.00 CASH OR N	MONEY ORDER PER COPY):
I CERTIFY THAT THE PERSON	S NAMED IN T	HE CERTIFICATE REQUESTED ARE:
☐ MYSELF AND MY SPOUSE		☐ MY PARENTS
☐ MY GRANDPARENTS		□ OTHER
INFORMATION OF PERSON MA	AKING THIS AP	PLICATION:
PRINTED FULL NAME		
ADDRESS	CITY	STATE, ZIP
SIGNATURE		DATE:

Please make sure all information is included to expedite your Marriage Certificate.

- Completed Application Form;
- Copy of Drivers License or Picture Identification
- Money order or cash for the correct amount No personal checks;
- Self Addressed Stamped Envelope.

Mail Your Request To:

Vital Statistics 235 Grand Street Waterbury, CT 06702